



Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

810608

IL #186

ILS-000-001-015

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name Amoco Oil Company
Street 200 East Randolph Drive
City Chicago State IL Zip Code 60601

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Amoco Oil Company Riverfront Property
Street LEVEE GATE ~~ROUTE 3~~
Northwest of River Site Being Closed
City Wood River County Madison State IL Zip Code 62095

TD980503221

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Bartels, Charles A., Supervisor, Solid Waste Control
Phone 618/251-2403

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) 1973 To (Year) 1978

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:

Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

- 1. ☐ Organics
- 2. ☐ Inorganics
- 3. ☐ Solvents
- 4. ☐ Pesticides
- 5. ☐ Heavy metals
- 6. ☒ Acids
- 7. ☐ Bases
- 8. ☐ PCBs
- 9. ☐ Mixed Municipal Waste
- 10. ☐ Unknown
- 11. ☐ Other (Specify)

Source of Waste:

Place an X in the appropriate boxes.

- 1. ☐ Mining
- 2. ☐ Construction
- 3. ☐ Textiles
- 4. ☐ Fertilizer
- 5. ☐ Paper/Printing
- 6. ☐ Leather Tanning
- 7. ☐ Iron/Steel Foundry
- 8. ☐ Chemical, General
- 9. ☐ Plating/Polishing
- 10. ☐ Military/Ammunition
- 11. ☐ Electrical Conductors
- 12. ☐ Transformers
- 13. ☐ Utility Companies
- 14. ☐ Sanitary/Refuse
- 15. ☐ Photofinish
- 16. ☐ Lab/Hospital
- 17. ☐ Unknown
- 18. ☒ Other (Specify)
Butene Polymerization

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

000101 JUN-88

291037
EPA Region 5 Records Ctr.



JUN 10 1981

Notification of Hazardous Waste Site

Side Two

F Waste Quantity:

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

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2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet _____

gallons Unknown

Total Facility Area

square feet _____

acres 3-4 **A****G Known, Suspected or Likely Releases to the Environment:**

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☒ Known ☐ Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

*See duplicate Attached
for map sketch*

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

J Signature and Title:

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Name R. J. Baechle
Street 400 South Main Street
City Wood River State IL Zip Code 62095
Signature *R. J. Baechle* Date 5-15-81

- ☒ Owner, Present
☐ Owner, Past
☐ Transporter
☒ Operator, Present
☐ Operator, Past
☐ Other

Notification of Hazardous Waste Site

Side Two

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Place an X in the appropriate boxes to indicate the facility types found at the site.

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8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet Unknown

gallons

Total Facility Area

square feet

acres Unknown

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Street 400 South Main Street

City Wood River State IL Zip Code 62095

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810608

IL 181
ILS-000-001-016

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Enter the name and address of the person or organization required to notify.

Name Amoco Oil Company
Street 200 East Randolph Drive
City Chicago State IL Zip Code 60601

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Amoco Oil Company Riverfront Property
Street ~~Highway 3~~ Levee Gate, RT 3
City Wood River County Madison State IL Zip Code 62095

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Bartels, Charles A., Supervisor, Solid
Phone 618/251-2403 Waste Control

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) (1) To (Year) 1980

(1) Unknown; could be since refinery began operations in 1908.

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:

Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

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2. ☒ Inorganics
3. ☒ Solvents
4. ☐ Pesticides
5. ☒ Heavy metals
6. ☒ Acids
7. ☒ Bases
8. ☐ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☒ Other (Specify)
Asbestos
Fly Ash

Source of Waste:

Place an X in the appropriate boxes.

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☒ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☐ Lab/Hospital
17. ☐ Unknown
18. ☒ Other (Specify)
Petroleum Refining

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

000098 JUN-88

JUN 10 1981

F Waste Quantity:

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☒ Piles
2. ☐ Land Treatment
3. ☐ Landfill
4. ☐ Tanks
5. ☒ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☒ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet 10-15 Million **C**

gallons _____

Total Facility Area

square feet _____

acres About 26 **A**

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☒ Known ☐ Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

Site presently being closed. Site is underlain with highly impermeable clay. Slurry wall is being constructed around site, keyed into underlying clay. Clay cap will be applied and graded for proper drainage.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name R. J. Baechle

Street 400 South Main Street

City Wood River State IL Zip Code 62095

Signature *R. J. Baechle* Date 5-15-81

☒ Owner, Present

☐ Owner, Past

☐ Transporter

☒ Operator, Present

☐ Operator, Past

☐ Other

Madison Co. - S.F.

RIVERFRONT FILE

IL-0407-09



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810608

2.5

1LS-000-001-016

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name	Amoco Oil Company			
Street	200 East Randolph Drive			
City	Chicago	State	IL	Zip Code 60601

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Amoco Oil Company Riverfront Property

Street Highway 3

City Wood River County Madison State IL Zip Code 62095

IL 980503221

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Bartels, Charles A., Supervisor, Solid
Waste Control
 Phone 618/251-2403

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) (1) To (Year) 1980

(1) Unknown; could be since refinery began operations in 1908.

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item 1—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

Source of Waste:
Place an X in the appropriate boxes.

1. ☒ Organics
2. ☒ Inorganics
3. ☒ Solvents
4. ☐ Pesticides
5. ☒ Heavy metals
6. ☒ Acids
7. ☒ Bases
8. ☐ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☒ Other (Specify)
Asbestos
Fly Ash

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2. ☐ Construction
3. ☐ Textiles
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5. ☐ Paper/Printing
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[illegible]

000098 JUL-88

JUN 10 1964

Notification of Hazardous Waste Site

Side Two

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Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

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Facility Type

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7. ☐ Drums, Above Ground
8. ☒ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amountcubic feet 10-15 Million **C**

gallons _____

Total Facility Area

square feet _____

acres About 26 **A****G Known, Suspected or Likely Releases to the Environment:**

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

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Street 400 South Main Street

City Wood River State IL Zip Code 62095

Signature *R. J. Baechle* Date 5-15-81

- ☒ Owner, Present
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☐ Transporter
☒ Operator, Present
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Notification of Hazardous Waste Site

Side Two

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Total Facility Waste Amount

cubic feet Unknown

gallons

Total Facility Area

square feet

acres Unknown

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Name R. J. Baechle

Street 400 South Main Street

City Wood River State IL Zip Code 62095

Signature

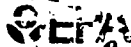
R. J. Baechle

Date

5-15-81

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IPD980503221

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000101 JUN -8 81

JUN 10 1981

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Total Facility Waste Amount

cubic feet _____

gallons Unknown**Total Facility Area**

square feet _____

acres 3-4 A**G Known, Suspected or Likely Releases to the Environment:**

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☐ Transporter
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☐ Operator, Past
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